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CONFIRMATION NO. 7554

<b>SERIAL NUMBER</b> 10/763,556	<b>FILING OR 371(c) DATE</b> 01/23/2004 <b>RULE</b>	<b>CLASS</b> 403	<b>GROUP ART UNIT</b> 3679	<b>ATTORNEY DOCKET NO.</b> THIELK-028XX
<b>APPLICANTS</b> Thomas Hinsberger, Schiffweiler, GERMANY; Stefan Ruppert, Homburg, GERMANY; Edwin Muurmann, Waldmohr, GERMANY;				
<b>** CONTINUING DATA *****</b>  <b>** FOREIGN APPLICATIONS *****</b> GERMANY 103 48 264.4 10/16/2003				
<b>IF REQUIRED, FOREIGN FILING LICENSE GRANTED</b> <b>** 04/29/2004</b>				
Foreign Priority claimed <input checked="" type="checkbox"/> yes <input type="checkbox"/> no 35 USC 119 (a-d) conditions met <input checked="" type="checkbox"/> yes <input type="checkbox"/> no <input type="checkbox"/> Met after Allowance Verified and Acknowledged <u>                    </u> Examiner's Signature <u>                    </u> Initials <u>                    </u>		<b>STATE OR COUNTRY</b> GERMANY	<b>SHEETS DRAWING</b> 3	<b>TOTAL CLAIMS</b> 12
			<b>INDEPENDENT CLAIMS</b> 1	
<b>ADDRESS</b> 28452				
<b>TITLE</b> SECURING DEVICE FOR REAR WALLS OF CABINET FURNITURE				
<b>FILING FEE RECEIVED</b> 970	FEES: Authority has been given in Paper No. _____ to charge/credit DEPOSIT ACCOUNT No. _____ for following:		<input type="checkbox"/> All Fees <input type="checkbox"/> 1.16 Fees ( Filing ) <input type="checkbox"/> 1.17 Fees ( Processing Ext. of time ) <input type="checkbox"/> 1.18 Fees ( Issue ) <input type="checkbox"/> Other _____ <input type="checkbox"/> Credit	